

House Study Bill 99 - Introduced

HOUSE FILE _____

BY (PROPOSED COMMITTEE ON
HUMAN RESOURCES BILL BY
CHAIRPERSON FRY)

A BILL FOR

1 An Act relating to prescription drugs, including the
2 drug prescribing and dispensing information program,
3 medication-assisted treatment insurance and Medicaid
4 coverage, partial dispensing for opioid medication, and
5 allocation of moneys to the pharmaceutical collection and
6 disposal program.
7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. Section 124.551, Code 2017, is amended by adding
2 the following new subsection:

3 NEW SUBSECTION. 3A. Each board created under chapter
4 147 that licenses a prescribing practitioner shall develop a
5 process to integrate automatic registration for the program as
6 part of the board's licensure application and renewal process.
7 Nothing in this subsection shall require a prescribing
8 practitioner to obtain information about a patient from the
9 program.

10 Sec. 2. Section 124.553, subsection 8, Code 2017, is amended
11 to read as follows:

12 8. The board may enter into an agreement with a prescription
13 database or monitoring program operated in a any state
14 ~~bordering this state or in the state of Kansas~~ for the mutual
15 exchange of information. Any agreement entered into pursuant
16 to this subsection shall specify that all the information
17 exchanged pursuant to the agreement shall be used and
18 disseminated in accordance with the laws of this state.

19 Sec. 3. NEW SECTION. 155A.28A **Partial dispensing of**
20 **prescription for opioid medication.**

21 1. a. Notwithstanding any provision of law to the
22 contrary, a pharmacist may dispense a prescription for an
23 opioid medication in a lesser quantity than the recommended
24 full quantity indicated on the prescription if requested by
25 the patient for whom the prescription is written or the legal
26 guardian of the patient for whom the prescription is written.

27 b. If a pharmacist partially dispenses a prescription in
28 accordance with this section, the remaining quantity of the
29 prescription not dispensed shall not be dispensed without a new
30 prescription.

31 2. If a pharmacist partially dispenses a prescription for
32 an opioid medication in accordance with this section, the
33 pharmacist or an authorized agent of the pharmacist shall,
34 as soon as is practicable but not more than seven days after
35 the partial dispensing, notify the prescriber of the quantity

1 of the opioid medication actually dispensed. The notice may
2 be conveyed to the prescriber by a notation on the patient's
3 electronic health record, electronic transmission, facsimile,
4 or telephone.

5 Sec. 4. Section 155A.43, Code 2017, is amended to read as
6 follows:

7 **155A.43 Pharmaceutical collection and disposal program —**
8 **annual allocation.**

9 Of the fees collected pursuant to sections 124.301 and
10 147.80 and this chapter 155A by the board of pharmacy, and
11 retained by the board pursuant to section 147.82, ~~not more than~~
12 ~~one hundred seventy-five thousand dollars may be allocated~~
13 the board may annually by the board allocate an adequate sum
14 for administering the pharmaceutical collection and disposal
15 program originally established pursuant to 2009 Iowa Acts,
16 ch. 175, §9. The program shall provide for the management
17 and disposal of unused, excess, and expired pharmaceuticals
18 including the management and disposal of controlled substances
19 pursuant to state and federal regulations. The board of
20 ~~pharmacy may cooperate~~ contract with the Iowa pharmacy
21 ~~association and may consult with the department and sanitary~~
22 ~~landfill operators in administering~~ or with one or more vendors
23 for the provision of supplies and services to manage and
24 maintain the program and to safely and appropriately dispose of
25 pharmaceuticals collected through the program.

26 Sec. 5. NEW SECTION. **514C.31 Medication-assisted treatment**
27 **coverage.**

28 1. As used in this section:

29 *a. "Behavioral therapy"* means individual, family, or group
30 therapy designed to help a patient engage in the treatment
31 process, modify the patient's attitudes and behaviors related
32 to substance use, and increase healthy life skills.

33 *b. "Financial requirements"* means deductibles, copayments,
34 coinsurance, or out-of-pocket maximums.

35 *c. "Health care professional"* means the same as defined in

1 section 135.154.

2 *d. "Medication-assisted treatment"* means the use of
3 medications, commonly in combination with counseling and
4 behavioral therapies, to provide a comprehensive approach to
5 the treatment of substance-related disorders.

6 *e. "Pharmacologic therapy"* means a prescribed course
7 of treatment that may include methadone, buprenorphine,
8 naloxone, naltrexone, or other federal food and drug
9 administration-approved or evidence-based medications for the
10 treatment of substance-related disorders.

11 *f. "Substance-related disorder"* means the same as defined
12 in section 125.2.

13 2. Notwithstanding the uniformity of treatment requirements
14 of section 514C.6, a policy, contract, or plan providing for
15 third-party payment or prepayment of health or medical expenses
16 shall provide coverage benefits for medication-assisted
17 treatment. Such benefits shall provide coverage for but not be
18 limited to pharmacologic therapies and behavioral therapies.

19 3. Medication-assisted treatment coverage benefits provided
20 for under this section shall not be subject to any of the
21 following:

22 *a.* Any annual or lifetime dollar limitations.

23 *b.* Limitations to a predesignated facility, specific number
24 of visits, days of coverage, days in a waiting period, scope or
25 duration of treatment, or other similar limits.

26 *c.* Different financial requirements than for other illnesses
27 covered under the policy, contract, or plan.

28 *d.* Step therapy, fail-first, or other similar drug
29 utilization strategies or policies for covered persons that may
30 conflict with a prescribed course of treatment from a licensed
31 health care professional.

32 4. Requirements for coverage under this section shall not
33 be subject to a covered person's prior successes or failures
34 associated with the services provided.

35 5. The provisions of this section shall apply to all

1 third-party payment provider contracts, policies, or plans
2 delivered, issued for delivery, continued, or renewed in this
3 state on or after July 1, 2017.

4 6. Any contract provision, written policy, or written
5 procedure in violation of this section shall be unenforceable
6 and null and void.

7 Sec. 6. MEDICAID MEDICATION-ASSISTED TREATMENT MEDICATIONS
8 AND SERVICES. The department of human services shall adopt
9 rules pursuant to chapter 17A to require the Iowa Medicaid
10 program to cover the medication-assisted treatment medications
11 and services provided for under section 514C.31, as enacted
12 in this Act, and include those medication-assisted treatment
13 medications in its preferred drug lists for the treatment of
14 substance-related disorders and prevention of overdose and
15 death. The list of medication-assisted treatment medications
16 provided for under section 514C.31, as enacted in this Act,
17 shall not be deemed to be exclusive, and, as new formulations
18 and medications are approved by the federal food and drug
19 administration for use in the treatment of substance-related
20 disorders, the Iowa Medicaid program shall update its preferred
21 drug lists.

22 EXPLANATION

23 The inclusion of this explanation does not constitute agreement with
24 the explanation's substance by the members of the general assembly.

25 This bill makes several changes to the drug prescribing
26 and dispensing program maintained by the board of pharmacy in
27 accordance with Code chapter 124. The bill requires each board
28 created under Code chapter 147 that licenses a prescribing
29 practitioner to develop a process to integrate automatic
30 registration for the program as part of that board's licensure
31 application and renewal process.

32 Currently, the board of pharmacy may enter into an agreement
33 with a prescription database or monitoring program operated in
34 Kansas or a state bordering Iowa. The bill allows the board
35 to enter into such an agreement with a program operated in any

1 state.

2 The bill allows a pharmacist to dispense a prescription for
3 an opioid medication in a lesser quantity than the recommended
4 full quantity indicated on the prescription if requested by the
5 patient for whom the prescription is written or the patient's
6 legal guardian. If a pharmacist does this, the remaining
7 quantity of the prescription shall not be dispensed without a
8 new prescription. Also, the pharmacist or an authorized agent
9 of the pharmacist shall, as soon as is practicable but not
10 more than seven days after the partial dispensing, notify the
11 prescriber of the quantity of the opioid medication actually
12 dispensed.

13 Currently, the board of pharmacy may annually allocate
14 not more than \$175,000 for administering the pharmaceutical
15 collection and disposal program. The bill allows the board
16 of pharmacy to allocate an adequate sum for the program every
17 year. The bill also allows the board of pharmacy to contract
18 with one or more vendors for the provision of supplies and
19 services to manage and maintain the program and to safely and
20 appropriately dispose of pharmaceuticals collected through the
21 program.

22 The bill establishes requirements for insurance coverage
23 for "medication-assisted treatment", defined by the bill
24 as the use of medications, commonly in combination with
25 counseling and behavioral therapies, to provide a comprehensive
26 approach to the treatment of substance-related disorders. The
27 bill specifies that all policies, contracts, or plans for
28 third-party payment of health or medical benefits must provide
29 coverage for medication-assisted treatment including but not
30 limited to pharmacologic and behavioral therapies. The bill
31 nullifies any contract provision, written policy, or written
32 procedure in violation of the bill.

33 The bill directs the department of human services to
34 adopt rules to require the Iowa Medicaid program to cover
35 medication-assisted treatment medications and services and

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1 include those medications in its preferred drug lists for the
2 treatment of substance-related disorders and prevention of
3 overdose and death.